

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	6/13
O.I.P.E. CLASSIFIER		49	6/13/13
FORMALITY REVIEW		65372	8-16-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ _____ Rejected
 ○ _____ Allowed
 - (Through normal) _____ Cancelled
 + _____ Restricted
 N _____ Non-elected
 I _____ Interference
 A _____ Appeal
 O _____ Objected

Claim	Date	Claim	Date	Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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